

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAR 31 AM 9:09

DOCUMENT # P95000013430

1. Corporation Name

RWC PROPERTIES, INC.

2. Principal Office Address

~~3110~~ 161 MARTINIQUE CIR.

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

PONTE VEDRA BEACH, FL

City & State

Zip

Country

Zip

Country

32082

700015287397
04/03/03--01043--006 **908.75

REINSTATEMENT 02-03

4. Date Incorporated or Qualified
To Do Business in Florida

2/16/95

5. FEI Number

59-3294913

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$6.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

FREDERICK E. WHEAT, JR.

Street Address (P.O. Box Number is Not Acceptable)

SAME 161 MARTINIQUE CIR.

Suite, Apt. #, Etc.

City

PONTE VEDRA BEACH, FL

State

FL

Zip Code

32082

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

F. E. Wheat, Jr.

Date

3/31/03

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES.	FREDERICK E. WHEAT, JR.	161 MARTINIQUE CIR. SAME	PONTE VEDRA BEACH, FL 32082

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

F. E. Wheat, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/03

Date

(904) 334-8630

Daytime Phone #

CR2E081 (10/02)